Town of Fairview 7400 Concord Highway Monroe NC 28110

Temporary Use Permit Application Fee: \$75

Application No:	Application Date:
Applicant's Name:	Email:
Applicant's Address:	
Zoning District:	
No. of Attachments:	
Received By:	Date:
Section(s) of Zoning Ordinance under Which Special Events Event	h a Temporary Permit is Being Requested: Section 161
How event shall be compatible with adjacent	t property owners:
List of events for the coming year (Please include date and hours of each event))
Noise Generated:	
Noise Generated.	
Parking and Traffic:	
Other:	

Description of Property:

Property Address:	
**	eation is made, present the entire necessary evidence (maps, etc.) showing how the requirements of the controlling section(s) of
	ed representative, hereby submit this application with the attached cuments provided are complete and accurate to the best of my
	SIGNATURE OF OWNER OR AUTHORIZED REPRESENTATIVE

Send completed application and check to:

Revised 8/25/16

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ORDER GRANTING/DENYING **TEMPORARY PERMIT**

Applicant:	Application #:	
Address:		
Requests for a temporary permit (state the re	quest)	
reviewed by the Land Use Administrator or Special Events of the Town of Fairview Lan Council, was (granted) (denied) on for granting/denying the request and any continuous continuous for granting for granti	d Use Ordinance and procedures set for the decision is as fol	sions of Section 161 orth by the Town llows (state the reason
Ed Humphries		
Land Use Administrator	Mayor	
Approved thisday of	20	